



**Iowa Child and Adult Care Food Program
At Risk After School Snack Program
Daily Snack Count Form**

1/2006

Date:	Total snacks received/prepared:
Today's Menu	Mark each number as a snack is served. Count only one snack per child per day.
	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 Adults 1 2 3 4 5 6 7 8 9 10
Snack supervisor's initials:	Total snacks served to: Students_____ Adults:_____
Date:	Total snacks received/prepared:
Today's Menu	Mark each number as a snack is served. Count only one snack per child per day.
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